

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

PACPLUS

ADDRESS (number and street)

268 Bush Street Unit4409

☐ Check if different  
than previously  
reported. (ACC)

San Francisco

CA

94104

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00516500

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lisa Le

Signature of Treasurer

Lisa Le

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
06 20 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PACPLUS

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 01 2012

To:

 M M / D D / Y Y Y Y Y  
 09 30 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	31363.59	
(c) Total Receipts (from Line 19) .....	54510.00	134814.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	85873.59	134814.44
7. Total Disbursements (from Line 31) .....	10049.49	58990.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	75824.10	75824.10
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**PACPLUS**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2012

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2012

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other  
Than Political Committees

(i) Itemized (use Schedule A).....

8600.00

15600.00

(ii) Unitemized .....

4590.00

4590.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

13190.00

20190.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

13190.00

20190.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

41320.00

114624.44

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

54510.00

134814.44

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

54510.00

134814.44

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	396.03	396.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	396.03	396.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	9000.00
24. Independent Expenditures (use Schedule E) .....	0.00	28700.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	7153.46	20894.31
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10049.49	58990.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10049.49	58990.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	13190.00	20190.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13190.00	20190.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	396.03	396.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	396.03	396.03

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 27

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

08 / 07 / 2012

Transaction ID : SA11AI.7634

Amount of Each Receipt this Period

427.39

Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

08 / 07 / 2012

Transaction ID : SA11AI.7635

Amount of Each Receipt this Period

259.31

Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

08 / 15 / 2012

Transaction ID : SA11AI.7638

Amount of Each Receipt this Period

633.87

Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2012

Transaction ID : SA11AI.7643

Amount of Each Receipt this Period

3227.25

Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

Transaction ID : SA11AI.7644

Amount of Each Receipt this Period

432.21

Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

Transaction ID : SA11AI.7647

Amount of Each Receipt this Period

643.49

Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

09 / 07 / 2012

**Transaction ID : SA11AI.7648**

Amount of Each Receipt this Period

595.45

Total earmarked through conduit; PAC limit not affected.

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

09 / 14 / 2012

**Transaction ID : SA11AI.7649**

Amount of Each Receipt this Period

273.72

Total earmarked through conduit; PAC limit not affected.

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

09 / 21 / 2012

**Transaction ID : SA11AI.7650**

Amount of Each Receipt this Period

537.85

Total earmarked through conduit; PAC limit not affected.

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

## **A. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

Transaction ID : SA11AI.7651

Amount of Each Receipt this Period

331.33

Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Algernon Austin**

Mailing Address 300 Hamilton Street NE, Apt. 203

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Economic Policy Institute

Occupation

Researcher

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

Transaction ID : SA11AI.6692

Amount of Each Receipt this Period

240.00

Earmarked through ActBlue

Full Name (Last, First, Middle Initial)

## **C. Helen Cagampang**

Mailing Address 1015 Fresno Ave.

City

Berkeley

State

CA

Zip Code

94707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 01 / 2012

Transaction ID : SA11AI.6684

Amount of Each Receipt this Period

20.00

Earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

260.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Helen Cagampang**

Mailing Address 1015 Fresno Ave.

City State Zip Code  
 Berkeley CA 94707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

09 / 01 / 2012

Transaction ID : SA11AI.6696

Amount of Each Receipt this Period

20.00

Earmarked through ActBlue

Full Name (Last, First, Middle Initial)

**B. Subodh Chandra**

Mailing Address 2275 Chestnut Hills Drive

City State Zip Code  
 Cleveland OH 44106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Chandra Law Firm, LLC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 08 / 2012

Transaction ID : SA11AI.6690

Amount of Each Receipt this Period

240.00

Earmarked through ActBlue

Full Name (Last, First, Middle Initial)

**C. Ana Grande**

Mailing Address 5923 Willoughby Ave. #3

City State Zip Code  
 Los Angeles CA 90038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 08 / 2012

Transaction ID : SA11AI.6688

Amount of Each Receipt this Period

240.00

Earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Jonathan Heller**

Mailing Address 3020 Buena Vista Way

City

Berkeley

State

CA

Zip Code

94708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Human Impact Partners

Occupation

Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

Transaction ID : SA11AI.6700

Amount of Each Receipt this Period

1000.00

Earmarked through ActBlue

Full Name (Last, First, Middle Initial)

**B. Larry Mennemeier**

Mailing Address P.O. Box 587

City

Boulder Creek

State

CA

Zip Code

95006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Patent Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 21 / 2012

Transaction ID : SA11AI.6694

Amount of Each Receipt this Period

50.00

Earmarked through ActBlue

Full Name (Last, First, Middle Initial)

**C. Larry Mennemeier**

Mailing Address P.O. Box 587

City

Boulder Creek

State

CA

Zip Code

95006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Patent Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 21 / 2012

Transaction ID : SA11AI.6698

Amount of Each Receipt this Period

50.00

Earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Steve Phillips**

Mailing Address 553 Arkansas St.

City State Zip Code  
 San Francisco CA 94107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

49835.00

Date of Receipt

08 / 27 / 2012

Transaction ID : SA11AI.7372

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Gretchen Sandler**

Mailing Address 185 Edgewood Ave.

City State Zip Code  
 San Francisco CA 94117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 06 / 2012

Transaction ID : SA11AI.5363

Amount of Each Receipt this Period

2500.00

Earmarked through ActBlue.

Full Name (Last, First, Middle Initial)

**C. Carol H Tolan**

Mailing Address 150 Columbus Ave., PH1A

City State Zip Code  
 New York NY 10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22500.00

Date of Receipt

07 / 31 / 2012

Transaction ID : SA11AI.7371

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. L. Joy Williams**

Mailing Address 147 Prince St. Suite #17

City

Brooklyn

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 07 / 2012

Transaction ID : SA11AI.6686

Amount of Each Receipt this Period

240.00

Earmarked through ActBlue

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

240.00

8600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 27

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2012

Transaction ID : SA17.7627

Amount of Each Receipt this Period

686.72
--------

Non-contribution account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2012

Transaction ID : SA17.7628

Amount of Each Receipt this Period

5484.42
---------

Non-contribution account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2012

Transaction ID : SA17.7629

Amount of Each Receipt this Period

211.27
--------

Non-contribution account. Total earmarked through conduit; PAC limit not affected.

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00
------

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# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 27

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 13 / 2012

**Transaction ID : SA17.7630**

Amount of Each Receipt this Period

340.96

Non-contribution account. Total earmarked through  
conduit; PAC limit not affected.

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 23 / 2012

**Transaction ID : SA17.7631**

Amount of Each Receipt this Period

542.64

Non-contribution account. Total earmarked through  
conduit; PAC limit not affected.

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Helen Cagampang**

Mailing Address 1015 Fresno Ave.

City

Berkeley

State

CA

Zip Code

94707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 01 / 2012

**Transaction ID : SA17.7375**

Amount of Each Receipt this Period

20.00

Non-contribution account. Earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

20.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 27

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Kim Geron**

Mailing Address 332 Sunset Blvd. #3

City

Hayward

State

CA

Zip Code

94541

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California State University

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

07 / 17 / 2012

**Transaction ID : SA17.7422**

Amount of Each Receipt this Period

40.00

Non-contribution account. Earmarked through ActBlue

Full Name (Last, First, Middle Initial)

**B. Mary Rocha for Antioch City Council**

Mailing Address 3022 Rio Grande Dr.

City

Antioch

State

CA

Zip Code

94509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

09 / 12 / 2012

**Transaction ID : SA17.5361**

Amount of Each Receipt this Period

215.00

Non-contribution account

Full Name (Last, First, Middle Initial)

**C. Larry Mennemeier**

Mailing Address P.O. Box 587

City

Boulder Creek

State

CA

Zip Code

95006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Patent Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

07 / 21 / 2012

**Transaction ID : SA17.7424**

Amount of Each Receipt this Period

50.00

Non-contribution account. Earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

305.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 27

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Steve Phillips**

Mailing Address 553 Arkansas St.

City State Zip Code  
 San Francisco CA 94107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47335.00

Date of Receipt

08 / 27 / 2012

**Transaction ID : SA17.5209**

Amount of Each Receipt this Period

32500.00

Non-contribution account

Full Name (Last, First, Middle Initial)

**B. Sydney Rubin**

Mailing Address 2405 Ridgeview St.

City State Zip Code  
 Austin TX 78704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 03 / 2012

**Transaction ID : SA17.7420**

Amount of Each Receipt this Period

240.00

Non-contribution account. Earmarked through ActBlue

Full Name (Last, First, Middle Initial)

**C. Carol H Tolan**

Mailing Address 150 Columbus Ave., PH1A

City State Zip Code  
 New York NY 10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21000.00

Date of Receipt

07 / 31 / 2012

**Transaction ID : SA17.5088**

Amount of Each Receipt this Period

6000.00

Non-contribution account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

38740.00

39065.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 27

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge      State MA      Zip Code 02238

Purpose of Disbursement  
CC online fees.

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      07      2012
**Transaction ID : SB21B.7662**

Amount of Each Disbursement this Period

10.69

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge      State MA      Zip Code 02238

Purpose of Disbursement  
CC online fees.

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      07      2012
**Transaction ID : SB21B.7664**

Amount of Each Disbursement this Period

17.61

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge      State MA      Zip Code 02238

Purpose of Disbursement  
CC online fees.

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      15      2012
**Transaction ID : SB21B.7666**

Amount of Each Disbursement this Period

26.13

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54.43

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 27

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge      State MA      Zip Code 02238

Purpose of Disbursement  
CC online fees.

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2012
**Transaction ID : SB21B.7668**

Amount of Each Disbursement this Period

132.75

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge      State MA      Zip Code 02238

Purpose of Disbursement  
CC online fees.

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 29 / 2012
**Transaction ID : SB21B.7670**

Amount of Each Disbursement this Period

17.79

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge      State MA      Zip Code 02238

Purpose of Disbursement  
CC online fees.

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2012
**Transaction ID : SB21B.7672**

Amount of Each Disbursement this Period

26.51

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

177.05

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

# PACPLUS

### A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement	CC online fees.
-------------------------	-----------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.7674

Amount of Each Disbursement this Period

24.55

Full Name (Last, First, Middle Initial)

## B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement	CC online fees.
-------------------------	-----------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

09 / 14 / 2012

Transaction ID : SB21B.7676

Amount of Each Disbursement this Period

11.28

Full Name (Last, First, Middle Initial)

### C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement	CC online fees.
-------------------------	-----------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.7678

Amount of Each Disbursement this Period

Category	Percentage
Students who did not pass the exam	22.15

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

57.98

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement  
CC online fees.

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2012

**Transaction ID : SB21B.7680**

Amount of Each Disbursement this Period

13.67
-------

Full Name (Last, First, Middle Initial)

**B. Intuit**

Mailing Address 2632 Marine Way

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
Purchase of checks

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2012

**Transaction ID : SB21B.5400**

Amount of Each Disbursement this Period

62.90
-------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

76.57
-------

366.03
--------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Friends of Maizie Hirono**

Mailing Address P.O. Box 677

City	State	Zip Code
Honolulu	HI	96809

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Maizie Hirono**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: HI

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2012

**Transaction ID : SB23.5398**

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►

2500.00

**TOTAL** This Period (last page this line number only)..... ►

2500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement  
Non-contribution account. CC online fees.

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2012

**Transaction ID : SB29.7652**

Amount of Each Disbursement this Period

28.28
-------

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement  
Non-contribution account. CC online fees.

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2012

**Transaction ID : SB29.7654**

Amount of Each Disbursement this Period

225.58
--------

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement  
Non-contribution account. CC online fees.

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2012

**Transaction ID : SB29.7656**

Amount of Each Disbursement this Period

8.73
------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

262.59
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement  
Non-contribution account. CC online fees.

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2012

**Transaction ID : SB29.7658**

Amount of Each Disbursement this Period

14.04
-------

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

Purpose of Disbursement  
Non-contribution account. CC online fees.

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2012

**Transaction ID : SB29.7660**

Amount of Each Disbursement this Period

22.36
-------

Full Name (Last, First, Middle Initial)

**C. Caplin & Drysdale**Mailing Address One Thomas Circle NW  
Suite 1100

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Non-contribution account. Accrued Expenses - Legal Fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2012

**Transaction ID : SB29.6675**

Amount of Each Disbursement this Period

24152.38
----------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.40
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Chambers Lopez Strategies**

Mailing Address P.O. Box 5539

City	State	Zip Code
Arlington	VA	22205

Purpose of Disbursement  
Non-contribution account. Prof Fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

**Transaction ID : SB29.5373**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Micael Estremera**

Mailing Address 353 King St. Apt 426k

City	State	Zip Code
San Francisco	CA	94158

Purpose of Disbursement  
Non-contribution account. Restaurant cost for event

003

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2012

**Transaction ID : SB29.5377**

Amount of Each Disbursement this Period

639.41
--------

Full Name (Last, First, Middle Initial)

**C. Fredrikson & Byron, P.A.**

Mailing Address PO Box 1484

City	State	Zip Code
Minneapolis	MN	55480

Purpose of Disbursement  
Non-contribution account. Legal

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2012

**Transaction ID : SB29.5375**

Amount of Each Disbursement this Period

249.00
--------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3388.41
---------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Timothy Huey**

Mailing Address 3056 Stinson Circle

City	State	Zip Code
Walnut Creek	CA	94598

Purpose of Disbursement  
Non-contribution account. Contractor for events

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2012

**Transaction ID : SB29.5371**

Amount of Each Disbursement this Period

1746.95
---------

Full Name (Last, First, Middle Initial)

**B. Timothy Huey**

Mailing Address 3056 Stinson Circle

City	State	Zip Code
Walnut Creek	CA	94598

Purpose of Disbursement  
Non-contribution account. Contractor for events

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2012

**Transaction ID : SB29.5380**

Amount of Each Disbursement this Period

1241.63
---------

Full Name (Last, First, Middle Initial)

**C. Spoon & Company**

Mailing Address 10307 Rawhide Trl

City	State	Zip Code
Austin	TX	78736

Purpose of Disbursement  
Non-contribution account. Catering cost

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2012

**Transaction ID : SB29.5368**

Amount of Each Disbursement this Period

108.25
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3096.83
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PACPLUS**

Full Name (Last, First, Middle Initial)

**A. Spotlight Design & Printing**

Mailing Address 725 Bryant St.

City	State	Zip Code
San Francisco	CA	94107

Purpose of Disbursement
Non-contribution account. Printing materials for events.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2012

**Transaction ID : SB29.5370**

Amount of Each Disbursement this Period

215.73
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

215.73

6999.96